Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OHIO		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar licer Bring iden	e the name that is on government-issued the identification (for inple, your driver's see or passport). If your picture tification to your ting with the trustee.	Judith First name A. Middle name Sutton Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ade your married or den names.	Judy A. Sutton	
3.	you num Indi	y the last 4 digits of r Social Security aber or federal vidual Taxpayer tification number	xxx-xx-7889	

Debtor 1 Judith A. Sutton Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s) EIN
5.	Where you live	2813 Bainbridge Avenue Youngstown, OH 44511	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Mahoning County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Debtor 1 Judith A. Sutton					Case r	number (if known)		
7. The chapter of the				Notice Re	auired by 11 U.S.	.C. § 342(b) for Individu	uals Filing for Bankruptcy	
Bankruptcy Code you are		Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
choosing to file under	■ Chap	ter 7						
	☐ Chap	ter 11						
	☐ Chap	ter 12						
	☐ Chap	ter 13						
8. How you will pay the fee	I will pay the entire fee when I file my petition. Please check with about how you may pay. Typically, if you are paying the fee yourse order. If your attorney is submitting your payment on your behalf, you a pre-printed address.					elf, you may pay with cash, cashier's check, or money		
☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individ The Filing Fee in Installments (Official Form 103A).					ation for Individuals to Pay			
	but ap	t is not requ plies to you	ur family size and you are una	may do so able to pay	o only if your inco y the fee in install	me is less than 150% of ments). If you choose t	of the official poverty line that this option, you must fill out	
		e Applicatio	on to Have the Chapter 7 Filin	g Fee Wa	ived (Official For	m 103B) and file it with	your petition.	
9. Have you filed for bankruptcy within the	☐ No.							
last 8 years?	Yes.							
		District	C13; ND OH, Youngstown, Dismissed 8/31/2020	When	4/16/19	Case number	19-40976	
		District	Disillissed 0/31/2020	When		Case number		
		District		_ When		Case number		
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with	■ No							
you, or by a business partner, or by an affiliate?								
		Debtor				Relationship to y	ou	
		District		_ When		Case number, if	known	
		Debtor				Relationship to y	ou	
		District		_ When		Case number, if	known	
11. Do you rent your residence?	■ No.	Go to li	ine 12.					
residence:	☐ Yes.	Has yo	ur landlord obtained an evicti	on judgm	ent against you?			
			No. Go to line 12.					
	Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and this bankruptcy petition.					101A) and file it as part of		
			this bankruptcy petition.					

Deb	otor 1 Judith A. Sutton				Case number (if known)			
ar	t 3: Report About Any Bu	sinesses	You Ow	n as a Sole Propriet	or			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Go to Part 4.				
		☐ Yes.	Name	Name and location of business				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.	operate as Name of business, if any and is not a entity such on,						
	If you have more than one sole proprietorship, use a separate sheet and attach		Numl	per, Street, City, State	e & ZIP Code			
	it to this petition.		Chec	k the appropriate box	to describe your business:			
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))			
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))			
				None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?	proceed you are o	<i>under</i> Suchoosing v stateme	bchapter V so that it to proceed under Sub	court must know whether you are a small business debtor or a debtor choosing to can set appropriate deadlines. If you indicate that you are a small business debtor or ochapter V, you must attach your most recent balance sheet, statement of operations, he tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C.			
■ No I am not filing under Chapter 11.				ter 11.				
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.			1, I am a small business debtor according to the definition in the Bankruptcy Code, and under Subchapter V of Chapter 11.			
		☐ Yes.			11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.			
Par	t 4: Report if You Own or	Have Any	/ Hazard	ous Property or Any	Property That Needs Immediate Attention			
14 .	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?				
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is , why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?				
	• , •				Number, Street, City, State & Zip Code			

Debtor 1 Judith A. Sutton Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101

Debto	or 1 Judith A. Sutton				Case numbe	「 (if known)
Part (Answer These Quest	ions for R	eporting Purposes			
	What kind of debts do you have?	16a.	Are your debts primarily co	onsumer debts? Const sonal, family, or househo	umer debts are defir	ned in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		usiness debts are debts that you incurred to obtain the operation of the business or investment. at after any exempt property is excluded and administrative expenses to unsecured creditors? 000	
			Yes. Go to line 17.			efined in 11 U.S.C. § 101(8) as "incurred by an test that you incurred to obtain usiness or investment. ess debts poperty is excluded and administrative expenses ris? 25,001-50,000
		16b.		Insumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an onal, family, or household purpose." Isiness debts? Business debts are debts that you incurred to obtain streent or through the operation of the business or investment. We that are not consumer debts or business debts 7. Go to line 18. 10 you estimate that after any exempt property is excluded and administrative expenses aliable to distribute to unsecured creditors? 1,000-5,000		
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you o	owe that are not consum	er debts or busines	s debts
7.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	7. Go to line 18.		
; 	Do you estimate that after any exempt property is excluded and administrative expenses	■ Yes.				
are paid that funds will be available for distribution to unsecure creditors?			☐ Yes			
	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-1 □ 200-9	99	□ 5001-10,000	0	5 0,001-100,000
(How much do you estimate your assets to be worth?	□ \$100,	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$10,000,001 □ \$50,000,001	- \$50 million - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion
(How much do you estimate your liabilities to be?	□ \$100,	50,000 001 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$10,000,001 □ \$50,000,001	- \$50 million - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion
art 7	7: Sign Below					
or y	ou	I have ex	camined this petition, and I dec	clare under penalty of pe	erjury that the inforn	nation provided is true and correct.
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.				
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
		bankrupt and 357	understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a pankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. s/ Judith A. Sutton			
		Judith	A. Sutton e of Debtor 1		Signature of Debtor	r 2
		Executed			Executed on	
			MM / DD / YYYY		MM	/ DD / YYYY

Debtor 1	Judith A. Sutton	Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

Is/ Roger S. Slain Signature of Attorney for Debtor	Date	June 7, 2021 MM / DD / YYYY
Roger S. Slain #0062049 Printed name		
Roger S. Slain, Esq.		
2012 West 25th Street, Suite #701 Cleveland, OH 44113		
Number, Street, City, State & ZIP Code Contact phone (216) 241-2808	Email address	roger@rogerslainlaw.com
#0062049 OH Bar number & State		_

Fill	in this information to identify your ca	se:			
	tor 1 Judith A. Sutton				
	First Name	Middle Name	Last Name		
	tor 2 se if, filing) First Name	Middle Name	Last Name		
Uni	ed States Bankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Cas	e number				
(if kn				_	c if this is an
				amen	ded filing
~ .					
	icial Form 106Sum				
	-		nd Certain Statistical Information		12/15
info	mation. Fill out all of your schedules	first; then complete th	are filing together, both are equally responsible for information on this form. If you are filing amend		
you	original forms, you must fill out a ne	w <i>Summary</i> and check	the box at the top of this page.		
Par	1: Summarize Your Assets				
				Your a	ssets of what you own
		1001/5		value (or what you own
1.	Schedule A/B: Property (Official Form 1a. Copy line 55, Total real estate, from	า 106A/B) n Schedule A/B		\$	50,000.00
	1b. Copy line 62, Total personal proper	rty, from Schedule A/B		\$	8,395.00
	1c. Copy line 63, Total of all property o	n Schedule A/B		\$	58,395.00
Par	2: Summarize Your Liabilities				
	-			Your li	abilities
					t you owe
2.	Schedule D: Creditors Who Have Clair			\$	25,633.37
	,,		the bottom of the last page of Part 1 of Schedule D	Ψ	
3.	Schedule E/F: Creditors Who Have Un 3a. Copy the total claims from Part 1 (priority unsecured claim	I Form 106E/F) is) from line 6e of <i>Schedule E/F</i>	\$	50.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured c	laims) from line 6j of <i>Schedule E/F</i>	\$	7,868.00
	,	•	,		7,000.00
			Your total liabilities	\$ \$	33,551.37
Par	3: Summarize Your Income and Ex	xpenses			
4.	Schedule I: Your Income (Official Form Copy your combined monthly income form		L	\$	1,299.00
5.	Schedule J: Your Expenses (Official Fo	orm 106J)		<u> </u>	1,270.83
	Copy your monthly expenses from line	22c of Schedule J		\$	1,270.03
Par	4: Answer These Questions for A	ministrative and Stati	stical Records		
6.	Are you filing for bankruptcy under	• • •			
	■ No. You have nothing to report or	this part of the form. Cl	heck this box and submit this form to the court with yo	our other sch	nedules.
_	Yes				
7.	What kind of debt do you have?				
			debts are those "incurred by an individual primarily for g for statistical purposes. 28 U.S.C. § 159.	· a personal,	family, or

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Best Case Bankruptcy

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 0.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	50.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	50.00

	Judith A. Sutto	on Middle	Name Last Name			
ebtor 2	First Name	N 4: -1-11 -	Name Last Name			
pouse, if filing)	First Name	Middle				
niled States i	Bankruptcy Court for the	e: NORTHER	N DISTRICT OF OHIO			
ase number						Check if this is a amended filing
· · · · · -	400 A /D					
	orm 106A/B I le A/B: Pro	nerty				12/15
		<u> </u>	n asset only once. If an asset fits	. in more than and	antamami lint the ann	
_						
Yes. Where	e is the property?		What is the property? Check all t ■ Single-family home	hat apply	Do not deduct secure	ed claims or exemptions. Put
Yes. Where	e is the property?	tion	What is the property? Check all to Single-family home Duplex or multi-unit buildi Condominium or coopera	ng	the amount of any se	ed claims or exemptions. Put cured claims on Schedule D: Claims Secured by Property.
Yes. Where 1 2813 Ba Street address	e is the property? inbridge Avenue ss, if available, or other descript		■ Single-family home □ Duplex or multi-unit buildi □ Condominium or coopera □ Manufactured or mobile h	ng tive	the amount of any se Creditors Who Have	cured claims on Schedule D: Claims Secured by Property. Current value of the
Yes. Where	e is the property? inbridge Avenue ss, if available, or other descript	tion !4511-0000 ZIP Code	Single-family home Duplex or multi-unit buildi Condominium or coopera	ng tive	the amount of any se Creditors Who Have	cured claims on Schedule D: Claims Secured by Property. Current value of the portion you own?
Yes. Where 2813 Ba Street addres	inbridge Avenue ss, if available, or other descript	4511-0000	Single-family home Duplex or multi-unit buildi Condominium or coopera Manufactured or mobile h Land Investment property Timeshare	ng tive	Current value of the entire property? \$50,000.0	cured claims on Schedule D: Claims Secured by Property. Current value of the portion you own?
Yes. Where 2813 Ba Street addres	inbridge Avenue ss, if available, or other descript	4511-0000	Single-family home Duplex or multi-unit buildi Condominium or coopera Manufactured or mobile h Land Investment property Timeshare Other Who has an interest in the pro	ng tive ome	Current value of the entire property? \$50,000.0 Describe the nature (such as fee simple a life estate), if known	cured claims on Schedule D: Claims Secured by Property. Current value of the portion you own? Storyour ownership interest, tenancy by the entireties, or
Yes. Where 2813 Ba Street addres	inbridge Avenue ss, if available, or other descript town OH 4 State	4511-0000	Single-family home Duplex or multi-unit buildi Condominium or coopera Manufactured or mobile h Land Investment property Timeshare Other Who has an interest in the property Debtor 1 only	ng tive ome	Current value of the entire property? \$50,000.0 Describe the nature (such as fee simple	cured claims on Schedule D: Claims Secured by Property. Current value of the portion you own? Storyour ownership interest, tenancy by the entireties, or
Yes. Where 2813 Ba Street addres Youngst	inbridge Avenue ss, if available, or other descript town OH 4 State	4511-0000	Single-family home Duplex or multi-unit buildi Condominium or coopera Manufactured or mobile h Land Investment property Timeshare Other Who has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on	ng tive ome perty? Check one	Current value of the entire property? \$50,000.0 Describe the nature (such as fee simple a life estate), if know Fee simple	Current value of the portion you own? Claims Secured by Property. Current value of the portion you own? Story of your ownership interest, tenancy by the entireties, cwn.
Yes. Where 2813 Ba Street addres Youngst City	inbridge Avenue ss, if available, or other descript town OH 4 State	4511-0000	Single-family home Duplex or multi-unit buildi Condominium or coopera Manufactured or mobile h Land Investment property Timeshare Other Who has an interest in the property Debtor 1 only Debtor 2 only At least one of the debtors	ng tive ome perty? Check one	Current value of the entire property? \$50,000.0 Describe the nature (such as fee simple a life estate), if know Fee simple Check if this is (see instructions)	cured claims on Schedule D: Claims Secured by Property. Current value of the portion you own? Storyour ownership interest, tenancy by the entireties, or
Yes. Where 2813 Ba Street addres Youngst City	inbridge Avenue ss, if available, or other descript town OH 4 State	4511-0000	Single-family home Duplex or multi-unit buildi Condominium or coopera Manufactured or mobile h Land Investment property Timeshare Other Who has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on	ng tive ome perty? Check one ly s and another add about this iter	Current value of the entire property? \$50,000.0 Describe the nature (such as fee simple a life estate), if know Fee simple Check if this is (see instructions)	Current value of the portion you own? Claims Secured by Property. Current value of the portion you own? Story of your ownership interest, tenancy by the entireties, cwn.
2813 Ba Street address Youngst City	inbridge Avenue ss, if available, or other descript town OH 4 State	4511-0000	Single-family home Duplex or multi-unit buildi Condominium or coopera Manufactured or mobile h Land Investment property Timeshare Other Who has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtors Other information you wish to	ng tive ome perty? Check one ly s and another add about this iter	Current value of the entire property? \$50,000.0 Describe the nature (such as fee simple a life estate), if know Fee simple Check if this is (see instructions)	Current value of the portion you own? Claims Secured by Property. Current value of the portion you own? Story of your ownership interest, tenancy by the entireties, cwn.

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

De	btor 1 J	udith A. Sutto	on		Case number (if known)	
3. C	Cars, vans,	trucks, tractor	s, sport utility ve	hicles, motorcycles			
_] No						
	I No I Yes						
•	■ Yes						
•	4 Males	Ford		Markov to a state of the control of	Do not d	educt secured cla	aims or exemptions. Put
3.) OWD	Who has an interest in the property? Check one	the amo	unt of any secure	d claims on Schedule D:
	Model:	Edge SE 4D	2440	Debtor 1 only	Creditors	s Who Have Clai	ms Secured by Property.
	Year:	2007 nate mileage:	442 500	Debtor 2 only		value of the	Current value of the portion you own?
	• • •	ormation:	143,509	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire pi	roperty?	portion you own?
		fair condition	n	At least one of the debtors and another			
	1 001 1	Tan Conditio		☐ Check if this is community property (see instructions)		\$400.00	\$400.00
E				d other recreational vehicles, other vehicles, tercraft, fishing vessels, snowmobiles, motorcyc		es	
-	pages you	have attached		rn for all of your entries from Part 2, including that number here			\$400.00
				terest in any of the following items?			Current value of the
	,					! [portion you own? Do not deduct secured claims or exemptions.
_		goods and furi Major appliance		, china, kitchenware			
	■ Yes. De	scribe					
		r 2 f f	nicrowave, sto 2,500; couch, lo loor lamps, ele ull size bed, 3 d	nes, silverware, small kitchen appliance; ve, refrigerator, kitchen island table, wa oveseat, side chair, 3 end tables, 2 table ctric heater, cedar chest, computer chai dressers, nightstand, floor lamp \$800; fu tand \$300; plastic patio table w/4 chair \$	sher; dryer lamps, 2 ir \$2,300; ull size bed,		\$5,910.00
ı		Televisions and including cell ph		eo, stereo, and digital equipment; computers, pri nedia players, games	inters, scanners,	music collection	ons; electronic devices
g 🖍	Collectibles	of value					
_	Examples:	Antiques and fig	urines; paintings, s, memorabilia, co	prints, or other artwork; books, pictures, or other llectibles	r art objects; staı	mp, coin, or ba	seball card collections;
	■ No □ Yes. De	scribe					
_	Examples:	for sports and Sports, photogra musical instrum	aphic, exercise, an	nd other hobby equipment; bicycles, pool tables,	golf clubs, skis;	canoes and ka	yaks; carpentry tools;
	■ No □ Yes. De	scribe					

Official Form 106A/B Schedule A/B: Property page 2

Debtor 1	Judith A. Sutton		Case number (if known)
10. Firearn <i>Examp</i> ■ No		guns, ammunition, and r	related equipment	
	Describe			
□ No		furs, leather coats, desig	gner wear, shoes, accessories	
	Miso	c. articles of used cl	othing	\$1,000.00
■ No		costume jewelry, engage	ement rings, wedding rings, heirloom jewelry, watches, gems,	gold, silver
	rm animals ples: Dogs, cats, birds, I	norses		
	Describe			
14. Any ot	her personal and hous	sehold items you did n	not already list, including any health aids you did not list	
☐ Yes.	Give specific information	on		
			rt 3, including any entries for pages you have attached	\$6,910.00
	scribe Your Financial As			
Do you ow	vn or have any legal o	r equitable interest in a	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash Examp □ No ■ Yes	oles: Money you have ir	ı your wallet, in your hon	ne, in a safe deposit box, and on hand when you file your peti	tion
. 55			Cash on hand	\$10.00
Examp —			unts; certificates of deposit; shares in credit unions, brokerage with the same institution, list each.	houses, and other similar
□ No ■ Yes			Institution name:	
	17.	1. Checking	Premier Bank	\$200.00
Examp	, mutual funds, or pub oles: Bond funds, invest		kerage firms, money market accounts	
■ No □ Yes		Institution or issuer na	ame:	
	ublicly traded stock ar enture	nd interests in incorpor	rated and unincorporated businesses, including an intere	st in an LLC, partnership, and
☐ Yes.	Give specific information	on about them		
Official Forr	m 106A/B		Schedule A/B: Property	page 3

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Best Case Bankruptcy

De	ebtor 1 Juditl	h A. Sutton	Case number (if known)	
		Name of entity:	% of ownership:	
	Negotiable inst Non-negotiable No	truments include personal checks, ca e instruments are those you cannot tr	gotiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. ransfer to someone by signing or delivering them.	
	☐ Yes. Give spe	ecific information about them Issuer name:		
21.	Retirement or Examples: Inte	pension accounts rests in IRA, ERISA, Keogh, 401(k),	403(b), thrift savings accounts, or other pension or profit-sharing pla	ans
	■ No □ Yes. List each	n account separately. Type of account:	Institution name:	
22.	Your share of a		so that you may continue service or use from a company t, public utilities (electric, gas, water), telecommunications companie	s, or others
	☐ Yes		Institution name or individual:	
23.	Annuities (A co	ontract for a periodic payment of mor	ney to you, either for life or for a number of years)	
	☐ Yes	Issuer name and description.		
24.		education IRA, in an account in a 0(b)(1), 529A(b), and 529(b)(1).	qualified ABLE program, or under a qualified state tuition progr	am.
	Yes	Institution name and description	on. Separately file the records of any interests.11 U.S.C. § 521(c):	
25.	Trusts, equitab	ole or future interests in property (other than anything listed in line 1), and rights or powers exerc	isable for your benefit
	☐ Yes. Give sp	ecific information about them		
26.		ights, trademarks, trade secrets, a rnet domain names, websites, proce	and other intellectual property eds from royalties and licensing agreements	
		ecific information about them		
27.		chises, and other general intangib ding permits, exclusive licenses, cod	oles operative association holdings, liquor licenses, professional licenses	
	■ No □ Yes. Give spe	ecific information about them		
Mo	oney or property	owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds ov ■ No	ved to you		
		ecific information about them, includi	ing whether you already filed the returns and the tax years	
29.	Family support Examples: Pas		support, child support, maintenance, divorce settlement, property se	ettlement
	■ No □ Yes. Give spe	ecific information		
30.	Examples: Unp	s someone owes you paid wages, disability insurance payn pefits; unpaid loans you made to som	ments, disability benefits, sick pay, vacation pay, workers' compensa- neone else	ation, Social Security
		ecific information		
Off	icial Form 106A/E	3	Schedule A/B: Property	page 4

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Best Case Bankruptcy

Debtor 1	Judith A. Sutton		Case number (if known)	
	sts in insurance polici	es or life insurance; health savings account (HS	SA); credit, homeowner's, or renter's insurar	nce
■ No □ Yes		ompany of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
If you some No		is due you from someone who has died living trust, expect proceeds from a life insuon	rance policy, or are currently entitled to reco	eive property because
Exam ■ No		whether or not you have filed a lawsuit of the disputes, insurance claims, or rights to the disputes in the di		
■ No	contingent and unliqu	idated claims of every nature, including o	counterclaims of the debtor and rights to	set off claims
■ No	nancial assets you did			
		of your entries from Part 4, including any er here		\$210.00
Part 5: Do	escribe Any Business-Re	lated Property You Own or Have an Interest In.	List any real estate in Part 1.	
■ No. G	own or have any legal or so to Part 6. Go to line 38.	equitable interest in any business-related prop	perty?	
		ommercial Fishing-Related Property You Own o t in farmland, list it in Part 1.	or Have an Interest In.	
■ No	ou own or have any leg b. Go to Part 7. s. Go to line 47.	al or equitable interest in any farm- or co	mmercial fishing-related property?	
Part 7:	Describe All Property	You Own or Have an Interest in That You Did N	ot List Above	
<i>Exam</i> □ No	u have other property aples: Season tickets, co . Give specific information	·		
		Oil, gas and mineral rights on primar Company	y w/D&L Energy Leasing	Unknown
		Riding lawn mower \$800; snow blow	er \$75	\$875.00
54 A dd	the dollar value of all	of your entries from Part 7. Write that nur	nber here	\$875.00

Official Form 106A/B Schedule A/B: Property page 5

Deb	otor 1 Judith A. Sutton		Case number (if known)	
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$50,000.00
56.	Part 2: Total vehicles, line 5	\$400.00		
57.	Part 3: Total personal and household items, line 15	\$6,910.00		
58.	Part 4: Total financial assets, line 36	\$210.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$875.00		
62.	Total personal property. Add lines 56 through 61	\$8,395.00	Copy personal property total	\$8,395.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$58,395.00

Official Form 106A/B Schedule A/B: Property page 6
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Best Case Bankruptcy

LEGAL DESCRIPTION

SITUATED in the Township of Austiniown, County of Mahoning, State of Ohio, and known as being Lot Number. One Hundred Thirty-three (133) in Kirkhaven Plat No. 5, as recorded in Volume 40 of Plats, Pages 10 and 11;

SAID fot has a frontage of Seventy (70) feet on the easterly line of Sainbridge Street and extends back on its northerly line One Hundred Eight-one and Forty-eight Hundredthe (181.45) feet, and on its woutherly line One Hundred Eighty-one and Thirty-one Hundredths (181.51) feet, having a rear line of Seventy (70) feet, as appears by said plat.

Permanent Parcel No: 48-002-0-192-00-0

Debtor 1	Judith A. Sutton			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO	
Case number				
(if known)				☐ Check if this is an amended filing
Official Fo	orm 106C			
Schedul	le C: The Pr	operty You C	Claim as Exempt	4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

exe	exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.					
Pa	Part 1: Identify the Property You Claim as Exempt					
1.	. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.					
	■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)					
	☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)					
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.					
	Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption					

Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2813 Bainbridge Avenue Youngstown, OH 44511 Mahoning	\$50,000.00		\$145,425.00	Ohio Rev. Code Ann. § 2329.66(A)(1)
County Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	2020:00(A)(T)
2007 Ford Edge SE 4D 2WD 143,509 miles	\$400.00		\$4,000.00	Ohio Rev. Code Ann. § 2329.66(A)(2)
Poor to fair condition Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
Pots, pans, dishes, silverware, small kitchen appliances, microwave,	\$5,910.00		\$5,910.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
stove, refrigerator, kitchen island table, washer; dryer 2,500; couch, loveseat, side chair, 3 end tables, 2 table lamps, 2 floor lamps, electric heater, cedar chest, computer chair \$2,3 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Misc. articles of used clothing Line from Schedule A/B: 11.1	\$1,000.00		\$1,000.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
End from Goriodale 77D. 1111			100% of fair market value, up to any applicable statutory limit	2020.00(-)(-)(d)

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Best Case Bankruptcy

3.		claiming a homestead exemption of more than \$170,350? o adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)
	No	
	Yes.	Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
		No
		Yes

Debtor 1	Judith A. Suttor	1				
	First Name	Middle Name	Last Name		-	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		-	
United States Bankr	untey Court for the	NORTHERN DISTRICT OF C	JHIO			
officed States Darkit	upicy Court for the.	NORTHERN DISTRICT OF C	<u> </u>		-	
Case number					□ Chook	if this is an
					_	led filing
Official Form 1	106D					
	-	Who Have Claims	Secured	by Propert	V	12/15
Be as complete and ac	curate as possible.	If two married people are filing toge	ther, both are equ	ally responsible for s	upplying correct informa	
s needed, copy the Ad number (if known).	Iditional Page, fill it	out, number the entries, and attach	it to this form. On	the top of any addition	nal pages, write your na	me and case
. Do any creditors hav	e claims secured by	your property?				
☐ No. Check thi	s box and submit t	his form to the court with your oth	er schedules. Yo	u have nothing else	to report on this form.	
Yes. Fill in all	of the information	below.				
Part 1: List All S	ecured Claims					
		more than one secured claim, list the c		Column A	Column B	Column C
		a particular claim, list the other credit cal order according to the creditor's na		Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
2.1 SN Servicing	Corporation	Describe the property that secures the claim:		value of collateral. \$25,633.37	claim \$50,000.00	If any \$0.00
Creditor's Name	g Corporation	2813 Bainbridge Avenue	- Ine ciaiii.	φ25,055.57	φ30,000.00	Ψ0.00
		Youngstown, OH 44511 M	ahoning			
		County	9. Ob a also all the at			
323 5th Stree		As of the date you file, the claim is apply.	5: Check all that			
Eureka, CA 9		Contingent				
Number, Street, City	/, State & ZIP Code	☐ Unliquidated☐ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply	<i>/</i> .			
Debtor 1 only		An agreement you made (such a	ıs mortgage or secı	ıred		
Debtor 2 only		car loan)				
Debtor 1 and Debto	•	Statutory lien (such as tax lien, n	nechanic's lien)			
☐ At least one of the d☐ Check if this claim		☐ Judgment lien from a lawsuit☐ Other (including a right to offset)				
community debt	Telates to a	Other (including a right to onset)				
	2/19/2003/9/					
Date debt was incurre	26/12 (mod)	Last 4 digits of account nu	mber 2134;7;	337		
Date debt was incurre		Last 4 digits of account nu	mber	337		
A 1 1 1 1 2 2 2				40= 0	22.27	
	-	olumn A on this page. Write that nu the dollar value totals from all page		\$25,63		
Write that number h	ere:	, 0		\$25,6	33.37	
Part 2: List Other	s to Be Notified fo	r a Debt That You Already Liste	ed			
Use this page only if y	you have others to b you for a debt you o any of the debts that	e notified about your bankruptcy fo we to someone else, list the credito you listed in Part 1, list the addition	or a debt that you a or in Part 1, and the	en list the collection a	gency here. Similarly, if	you have more
	t fill out or submit th	iis page.				
debts in Part 1, do no Name, Numbe	r, Street, City, State &		On which	n line in Part 1 did you e	enter the creditor? 2.1	
debts in Part 1, do not Name, Numbe Ethan Hill	r, Street, City, State &			n line in Part 1 did you e		

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

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Debtor	Judith A. Su	tton		Case number (if known)
	First Name	Middle Name	Last Name	
[]				
		eet, City, State & Zip Code Association Trustee		On which line in Part 1 did you enter the creditor? 2.1
		Series IV Trust		Last 4 digits of account number 1234
	7530 Lucerne [Orive Suite 210		

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 2

Middleburg Heights, OH 44130

Fill	n this informat	tion to identify your o	2350.							
		non to lacining your t								
Deb	tor 1	Judith A. Sutton First Name	Middle Name	Last Nam						
Deh	tor 2	i iist ivaille	Wilddle Name	Lastivalli	,					
	ise if, filing)	First Name	Middle Name	Last Name	•					
Unit	ed States Bankı	ruptcy Court for the:	NORTHERN DIS	STRICT OF OHIO						
Coo	e number									
(if kno									Check if amende	f this is an ed filing
Offi	cial Form	106E/F								
Scł	nedule E/F	: Creditors W	ho Have Un	secured Claim	S					12/15
Schee Schee left. A	dule G: Executor dule D: Creditors attach the Contin and case numbe	y Contracts and Unexp Who Have Claims Secu uation Page to this pag	red Leases (Official ured by Property. If e. If you have no inf	a claim. Also list executo Form 106G). Do not inclu more space is needed, co ormation to report in a Pa	de any cre	editors with p t you need, f	oartially s	secured cla number the	ims that ar e entries in	re listed in the boxes on the
1.	Do any creditors	have priority unsecured	d claims against you	ı?						
	☐ No. Go to Part	2.								
	Yes.									
i I	dentify what type operations dentify what type operations are the clark and the clark are the clark	of claim it is. If a claim ha aims in alphabetical orde n one creditor holds a pa	s both priority and no r according to the cre rticular claim, list the		laim here a ore than tw	and show both	n priority a	and nonprior	rity amounts	s. As much as
(For an explanatio	n of each type of claim, s	ee the instructions fo	r this form in the instruction	booklet.)	Total clain	n	Priority amount		Nonpriority amount
2.1		artment of Taxatio	n Last 4	digits of account number	3183		\$50.00		\$50.00	\$0.0
	PO Box 5	cy Division	When v	vas the debt incurred?	Unknov	wn		_		
		et City State Zip Code	As of the	ne date you file, the claim	is: Check a	all that apply				
	Who incurred th	ne debt? Check one.	☐ Con	tingent						
	■ Debtor 1 only	•	☐ Unli	quidated						
	☐ Debtor 2 only	,	☐ Disp	outed						
	☐ Debtor 1 and	Debtor 2 only	Type of	f PRIORITY unsecured cla	im:					
	☐ At least one of	of the debtors and anothe	r 🗖 Don	nestic support obligations						
	☐ Check if this	claim is for a commun	itv debt	es and certain other debts y	ou owe the	government				
	Is the claim sub		_	ms for death or personal inj		•	cated			
	■ No	-	☐ Othe	er. Specify						
	Yes			State inco	ne tax					
Part	2: List All o	of Your NONPRIORIT	Y Unsecured Clai	ms						
		have nonpriority unsec								
	_ *	. ,	· ·	•						
		nothing to report in this pa	art. Submit this form t	o the court with your other	scnedules.					
	Yes.									
1	unsecured claim, I	ist the creditor separately	for each claim. For e	cical order of the creditor each claim listed, identify whin Part 3.If you have more t	at type of c	claim it is. Do	not list cla	aims alread	y included ir	n Part 1. If more

Total claim

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 5

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26280

Judith A. Sutton		Case number (if known)				
Capital One Nonpriority Creditor's Name	Last 4 digits of account number	Unknown	\$3,333.00			
PO Box 30285 Salt Lake City, UT 84130-0285	When was the debt incurred?	2012				
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
Who incurred the debt? Check one.						
Debtor 1 only	☐ Contingent					
☐ Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
Yes	Other. Specify Credit Card	d Purchases				
Frost-Arnett Company	Last 4 digits of account number	4543	\$630.00			
Nonpriority Creditor's Name PO Box 198988 Nashville, TN 37219-8988	When was the debt incurred?	2018				
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
Who incurred the debt? Check one.						
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
☐ Check if this claim is for a community	Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
■ No	☐ Debts to pension or profit-sharin					
□Yes	■ Other. Specify Medical Se Center)	rvices (St. Elizabeth Health				
Highland Springs LLC	Last 4 digits of account number	6705	\$1,100.00			
Nonpriority Creditor's Name 4199 Mill Pond Drive Highland Hills, OH 44122	When was the debt incurred?	4/2/18				
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
Who incurred the debt? Check one.						
Debtor 1 only						
Debtor 2 only						
Debtor 1 and Debtor 2 only	☐ Disputed					
\square At least one of the debtors and another	Type of NONPRIORITY unsecure					
Check if this claim is for a community	Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts					
■ No						
□ Yes	■ Other. Specify Medical Se					

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 5

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Lane Life Trans	Last 4 digits of account number 7198	\$265.00						
Nonpriority Creditor's Name		Ψ203.00						
PO Box 515	When was the debt incurred? 4/16/18							
Bolivar, OH 44612-0515								
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply							
Debtor 1 only								
_	Contingent							
Debtor 2 only	Unliquidated							
Debtor 1 and Debtor 2 only	Disputed							
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:							
Check if this claim is for a community	☐ Student loans							
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims							
■ No	\square Debts to pension or profit-sharing plans, and other similar debts							
Yes	■ Other. Specify Medical Service							
Mercy Health Hospital	Last 4 digits of account number 1499	\$2,280.00						
Nonpriority Creditor's Name								
Attn Patient Accounts 1044 Belmont Avenue	When was the debt incurred? 4/18/18 - 4/24/18							
Youngstown, OH 44501								
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply							
Who incurred the debt? Check one.								
■ Debtor 1 only	☐ Contingent							
☐ Debtor 2 only	☐ Unliquidated							
Debtor 1 and Debtor 2 only	□ Disputed							
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans							
☐ Check if this claim is for a community								
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims							
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts							
Yes	■ Other. Specify Center) Medical Service (St. Elizabeth Health Center)							
MercyHealth	Last 4 digits of account number 0158	\$80.00						
Nonpriority Creditor's Name PO Box 203600	When was the debt incurred? 4/1/18-4/2/18							
Austin, TX 78720-3600	41110 412110							
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply							
Who incurred the debt? Check one.								
■ Debtor 1 only	☐ Contingent							
☐ Debtor 2 only								
☐ Debtor 1 and Debtor 2 only	☐ Disputed							
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:							
☐ Check if this claim is for a community	☐ Student loans							
debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims							
Is the claim subject to offset?								
No	Debts to pension or profit-sharing plans, and other similar debts							
	Medical Service (St. Elizabeth Health Other. Specify Center)							

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 5

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Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 4 of 5

Total Claim

Debtor 1	Judith A. Sutton	

Case number (if known)

				`	, <u> </u>
Total	6a.	Domestic support obligations	6a.	\$	0.00
laims	01		01		
rom Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	50.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	50.00
					Total Claim
al	6f.	Student loans	6f.	\$	0.00
ims m Part 2	6g.	Obligations arising out of a separation agreement or divorce that			
	-3.	you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	7,868.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	7,868.00

Fill in this inform	mation to identify your	case:		
Debtor 1	Judith A. Sutton	_		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	NORTHERN DISTRICT	OF OHIO	
Case number				
(if known)				☐ Check if this is amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 D&L Energy Leasing Company Inc
2761 Saltsprings Road
Youngstown, OH 44509

State what the contract or lease is for
Oil, gas and mineral lease effective 1/17/19

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Fill in this	s information to identify your	case:			
Debtor 1	Judith A. Sutton				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, fil	ling) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	r of ohio		
Case num	nber				☐ Check if this is an amended filing
Officia	al Form 106H				
Sched	dule H: Your Cod	lebtors			12/15
your name	e and case number (if known). Answer every question	1.		of any Additional Pages, write
■ No					
	thin the last 8 years, have yo na, California, Idaho, Louisiana				states and territories include
	o. Go to line 3. es. Did your spouse, former spo	ouse, or legal equivalent liv	e with you at the time?		
in lin Form	e 2 again as a codebtor only	if that person is a guarar	ntor or cosigner. Make	sure you have listed th	with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and 2	ZIP Code		Column 2: The cre Check all schedules	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D, line	9
	Name			☐ Schedule E/F, lin	
				☐ Schedule G, line	·
	Number Street City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	ne
	Number Street City	State	ZIP Code	_	

						ı			
	in this information to identify your optor 1 Judith A. Su								
I	btor 2 buse, if filing)				_				
Un	ited States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF OHIO						
(If kı	se number nown)		-				ded filing ment showir	ng postpetition following date:	
	fficial Form 106l					MM / DD	YYYYY		
S	chedule I: Your Inc	ome							12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. The Describe Employment information.	ır spouse is not filing w	ith you, do not inclu	ide infor	mati	on about your s I case number (pouse. If m if known). <i>i</i>	ore space is	needed,
	If you have more than one job,		☐ Employed	☐ Employed			ployed		
	attach a separate page with information about additional employers.	Employment status	■ Not employed				☐ Not employed		
	Include part-time, seasonal, or	Occupation							
	self-employed work.	Employer's name							
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here?						
Pai	t 2: Give Details About Mo	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any	line, write \$0 in t	ne space. In	iclude your no	n-filing
,	u or your non-filing spouse have m e space, attach a separate sheet to	1 2 /	ombine the informatio	n for all e	emplo	oyers for that per	son on the I	lines below. If	you need
						For Debtor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00) \$	N/A	-
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	N/A	-
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	0.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

					For Debtor 1			r Debtor 2 or n-filing spouse
	Сору	y line 4 here	4.	-	\$ 0.	.00	\$	N/A
5.		all payroll deductions:					_	
	5a.	Tax, Medicare, and Social Security deductions	5a.	:	\$ 0.	.00	\$	N/A
	5b.	Mandatory contributions for retirement plans	5b.		:	.00	\$-	N/A
	5c.	Voluntary contributions for retirement plans	5c.		· <u> </u>	.00	\$_	N/A
	5d.	Required repayments of retirement fund loans	5d.		Ť	.00	\$-	N/A
	5e.	Insurance	5e.		·	.00	\$	N/A
	5f.	Domestic support obligations	5f.		·	.00	\$	N/A
	5g.	Union dues	5g.		·	.00	\$_	N/A
	5h.	Other deductions. Specify:	5h			.00	۰\$-	N/A
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	9		.00	\$	N/A
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	9	. 0.	.00	\$_	N/A
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	;	\$ 0.	.00	\$	N/A
	8b.	Interest and dividends	8b.	:		.00	\$	N/A
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	;		.00	\$	N/A
	8d.	Unemployment compensation	8d.	:	\$ 0.	.00	\$	N/A
	8e.	Social Security	8e.	;	\$ 1,299.	.00	\$	N/A
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	_ 8f.		\$.00	\$_	N/A
	8g.	Pension or retirement income	8g.			.00	\$_	N/A
	8h.	Other monthly income. Specify:	8h	+ :	\$0.	.00	+ \$_	N/A
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,299.	.00	\$_	N/A
10.	Calc	culate monthly income. Add line 7 + line 9.	10. \$;	1,299.00	+ \$		N/A = \$ 1,299.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			1,200.00	-		1,200.00
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your r friends or relatives. iot include any amounts already included in lines 2-10 or amounts that are not a cify:	deper				-	Schedule J. 11. +\$ 0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest is that amount on the Summary of Schedules and Statistical Summary of Certain is						12. \$ 1,299.00 Combined
13.	Do y	rou expect an increase or decrease within the year after you file this form? No.	?					monthly income
		Yes. Explain: May receive a cost of living increase within then	next	ye	ar.			
		Social Security Disability: \$1,447.50 gross/\$1,299	.00 n	et				

Official Form 106l Schedule I: Your Income page 2

Eill	in this informat	tion to identify yo	our case.						
						Ch	e if the in-		
Deb	ior i	Judith A. Su	tton				k if this is: An amended filing		
	tor 2						A supplement shov	ving postpetition chapte	r
(Spc	ouse, if filing)					ŕ	13 expenses as of	the following date:	
Unit	ed States Bankri	uptcy Court for the	: NORTH	IERN DISTRICT OF OHIO	<u> </u>	1	MM / DD / YYYY		
Cas	e number								
(If kı	nown)								
Of	fficial Fo	rm 106J							
Sc	chedule	J: Your l	Exper	nses				12	2/15
Be info	as complete a	and accurate as	possible eded, atta	. If two married people a ch another sheet to this					
Par 1.	t 1: Descri	ibe Your House	hold						
١.	No. Go to								
		=-	in a separ	ate household?					
	□ No								
			st file Offici	al Form 106J-2, Expense	s for Separate House	hold of Debte	or 2.		
2.	Do you have	e dependents?	■ No						
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?	
	Do not state							□ No	
	dependents i	names.						☐ Yes	
								□ No □ Yes	
					-			□ No	
								☐ Yes	
								□ No	
•	_							☐ Yes	
3.		enses include f people other tl	han	No					
		d your depende		Yes					
Par	t 2: Fetima	ate Your Ongoi	na Month	ly Fynenses					
Est	imate your ex	penses as of yo	our bankr	uptcy filing date unless y is filed. If this is a sup					
the	value of such	n assistance an		government assistance cluded it on Schedule I:			Your expe	enses	
(UII	ficial Form 10	ui. <i>j</i>					. our oxpo		
4.		r home owners d any rent for the		ses for your residence. or lot.	Include first mortgage	4. \$		0.00	
	If not includ	ed in line 4:							
	4a. Real e	state taxes				4a. \$		0.00	
	•	rty, homeowner's	-			4b. \$		0.00	
		maintenance, re owner's associat		upkeep expenses		4c. \$ 4d. \$		20.00	
5.				our residence, such as h	ome equity loans	4u. φ 5. \$		0.00 0.00	

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

23a. Copy line 12 (your combined monthly income) from Schedule I.

23c. Subtract your monthly expenses from your monthly income.

23b. Copy your monthly expenses from line 22c above.

The result is your monthly net income.

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

Yes.

Explain here: Debtor is a diabetic and pays for two types of insulin and other prescriptions - cost may increase within the next year.

23a. \$

23b.

23c.

1,299.00

1,270.83

28.17

	is information to identify your	case:					
Debtor 1	Judith A. Sutton First Name	Middle Name		Last Name			
Debtor 2							
(Spouse if, f	filing) First Name	Middle Name		Last Name			
United St	tates Bankruptcy Court for the:	NORTHERN DIST	TRICT OF O	HIO			
Case nur	mber						
(if known)						Check if this is a amended filing	an
Officia	l Form 106Dec						
	aration About a	ın Individi	ual De	btor's S	Schedules		12/15
If two ma	rried people are filing togethe	r. both are equally r	responsible	for supplying	correct information.		
			•			statement concealing proper	tu or
obtaining	t file this form whenever you fi g money or property by fraud i	n connection with a	a bankruptc	y case can resi	ult in fines up to \$25	0,000, or imprisonment for up	to 20
years, or	both. 18 U.S.C. §§ 152, 1341, 1	519, and 3571.					
	Sign Below						
Did	you pay or agree to pay some	one who is NOT an	attorney to	help you fill o	ut hankruntey forms	?	
5.0	you pay or agree to pay come	0110 W110 10 110 1 W11	accomby to	noip you iii o	at ballia aptoy formo		
	No						
	Yes. Name of person					Bankruptcy Petition Preparer's I tion, and Signature (Official For	
					Declara	lilon, and Signature (Official Fol	1111 119)
	er penalty of perjury, I declare they are true and correct.	that I have read the	summary a	and schedules	filed with this declar	ration and	
X	/s/ Judith A. Sutton			X			
_	Judith A. Sutton Signature of Debtor 1			Signature	e of Debtor 2		
	Date June 7, 2021			Date			

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fill	in th	nis information to identify yo	ur case:			
De	btor 1	Judith A. Sutto	n			
		First Name	Middle Name	Last Name		
	btor 2 ouse if,		Middle Name	Last Name		
Un	ited S	States Bankruptcy Court for the	e: NORTHERN DISTRIC	T OF OHIO		
1	se nu nown)	umber				Check if this is an amended filing
St	ate	al Form 107 ment of Financial				4/19
info	rmat nber	omplete and accurate as position. If more space is needed (if known). Answer every qu	d, attach a separate sheet estion.	to this form. On the top of ar		
Ра	rt 1:	Give Details About Your N	narital Status and Where Y	ou Lived Before		
1.	Wha	at is your current marital sta	tus?			
		Married				
		Not married				
2.	Dur	ing the last 3 years, have yo	u lived anywhere other tha	n where you live now?		
		No Yes. List all of the places you	ı lived in the last 3 years. Do	not include where you live no	w.	
	De	btor 1 Prior Address:	Dates Debtor lived there	1 Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there
3 . stat		hin the last 8 years, did you on the last 8 y				
		No				
		Yes. Make sure you fill out S	chedule H: Your Codebtors	(Official Form 106H).		
Pa	rt 2	Explain the Sources of Yo	our Income			
4.	Fill i	you have any income from e in the total amount of income y ou are filing a joint case and yo	ou received from all jobs an	d all businesses, including par	t-time activities.	endar years?
		No				
		Yes. Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

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5.	Include in and other	come regard public benef	less of wheth it payments;	e during this year or t er that income is taxal pensions; rental incom e and you have incom	ole. Examples o e; interest; divi	of <i>other incom</i> e are a dends; money collec	limony; child suppo ted from lawsuits;	royalties; and	ecurity, unemployment, I gambling and lottery
	List each	source and t	he gross inco	me from each source	separately. Do	not include income t	hat you listed in lin	e 4.	
	□ No								
		Fill in the de	tails.						
	00.	1 III III III II I	idilo.						
				Debtor 1	0	- i	Debtor 2		Ouere income
				Sources of income Describe below.	each (befo	s income from source re deductions and sions)	Sources of incomposition Describe below.		Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:				Social Security Benefits					
				Stimulus Income		\$2,000.00			
For last calendar year: (January 1 to December 31, 2020)			31, 2020)	Social Security Benefits					
				Stimulus Income		\$1,200.00			
For the calendar year before that: (January 1 to December 31, 2019)				Social Security \$16,878.00 Benefits					
	Are eithe No.	r Debtor 1's Neither De individual p During the No. Yes * Subject to	or Debtor 2' ebtor 1 nor Debtor 1 nor Debtor 2 or Debtor 3 or Debtor 5 or Debtor 5 or Debtor 5 or Debtor 6 or Debtor 7 List below 6 include pay	each creditor to whom yeditor. Do not include peayments to an attorned on 4/01/22 and every roth have primarily are you filed for bankru	consumer debts? consumer debusehold purpo otcy, did you pa you paid a total bayments for do ey for this bank 3 years after th consumer del otcy, did you pa	bts. Consumer debtes." ay any creditor a total of \$6,825* or more in the compact of the compact	I of \$6,825* or mor n one or more pay lations, such as ch or after the date of I of \$600 or more?	re? ments and the ild support and fadjustment.	ne total amount you nd alimony. Also, do creditor. Do not
	Cradita	's Name and	•	Dates of	navmort	Total amount	Amount you	Was this -	ayment for
	Orealtor	5 Hame all	4 AUUI 533	Dates U	paymont	paid	still owe	mus tins p	ayınıcını ioi

Case number (if known)

Official Form 107

Debtor 1 **Judith A. Sutton**

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

Case number (if known)

Official Form 107

Debtor 1

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

	btor 1 Judith A. Sutton	Case number	(if known)								
Pa	rt 5: List Certain Gifts and Contribution	s									
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No □ Yes. Fill in the details for each gift.										
	Gifts with a total value of more than \$60 per person	0 Describe the gifts	Dates you gave the gifts	Value							
	Person to Whom You Gave the Gift and Address:										
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No										
	☐ Yes. Fill in the details for each gift or c	ontribution.									
	Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code		Dates you contributed	Value							
Pai	rt 6: List Certain Losses										
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster or gambling? No Yes. Fill in the details.										
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .	Date of your loss	Value of property lost							
Pa	rt 7: List Certain Payments or Transfers										
4.0	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details.										
16.	consulted about seeking bankruptcy or placed any attorneys, bankruptcy petition p	preparing a bankruptcy petition?		rty to anyone you							
16.	consulted about seeking bankruptcy or placed any attorneys, bankruptcy petition p	preparing a bankruptcy petition? preparers, or credit counseling agencies for services require Description and value of any property transferred		Amount of payment							
16.	consulted about seeking bankruptcy or placed any attorneys, bankruptcy petition position in the latest part of the latest part	preparing a bankruptcy petition? preparers, or credit counseling agencies for services require Description and value of any property transferred	d in your bankruptcy. Date payment or transfer was	Amount of							

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

Deb	otor 1 Judith A. Sutton		(Jase number	(if known)		
17.	Within 1 year before you filed for bankruptcy, d promised to help you deal with your creditors o Do not include any payment or transfer that you list	or to make payments			or transfer any propei	ty to anyone who	
	■ No □ Yes. Fill in the details.						
	Person Who Was Paid Address	Description and v transferred	alue of any prop	erty	Date payment or transfer was made	Amount of payment	
	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busin Include both outright transfers and transfers made include gifts and transfers that you have already lis No Yes Fill in the details	ness or financial affa as security (such as t	i irs? he granting of a s				
	Person Who Received Transfer Address	Description and v			any property or s received or debts xchange	Date transfer was made	
19.	Person's relationship to you Within 10 years before you filed for bankruptcy, beneficiary? (These are often called asset-protect)		y property to a s	elf-settled tı	rust or similar device o	of which you are a	
	No Yes. Fill in the details.	uon devices.)					
	Name of trust	Description and v	alue of the prop	erty transfer	red	Date Transfer was made	
						maue	
	Within 1 year before you filed for bankruptcy, w sold, moved, or transferred? Include checking, savings, money market, or of houses, pension funds, cooperatives, associati No Yes. Fill in the details.	vere any financial ac	counts or instru	ments held i			
		st 4 digits of count number	Type of accour instrument	cl m	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?						
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the	contents	Do you still have it?	
22.	Have you stored property in a storage unit or pl	lace other than your	home within 1 y	ear before y	ou filed for bankruptc	y?	
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe the	contents	Do you still have it?	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Judith A. Sutton			Case number (if known)						
Pai	rt 9: Identify Property You Hold or Control for	Someone Else							
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.								
	_								
	■ No □ Yes Fill in the details								
	Yes. Fill in the details. Owner's Name	Where is the property?	Do	Value					
	Address (Number, Street, City, State and ZIP Code)	(Number, Street, City, State and ZIP Code)	De.	scribe the property	Value				
Pai	rt 10: Give Details About Environmental Inform	ation							
For	the purpose of Part 10, the following definitions	apply:							
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface water, groun	_	•					
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		law,	whether you now own, operate,	or utilize it or used				
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s wa	ste, hazardous substance, toxic s	substance,				
Rep	oort all notices, releases, and proceedings that y	ou know about, regardless of whe	n the	ey occurred.					
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	e unc	der or in violation of an environme	ental law?				
	■ No								
	Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any	release of hazardous material?							
	■ No								
	☐ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or admini		/ironr	mental law? Include settlements a	and orders.				
	■ No								
	Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case				
		·							
Pai	rt 11: Give Details About Your Business or Cor	nnections to Any Business							
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of	the following connections to any	/ business?				
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity,	, eith	er full-time or part-time					
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	hip (L	LP)					
	☐ A partner in a partnership								
	☐ An officer, director, or managing execu	tive of a corporation							
	☐ An owner of at least 5% of the voting or	r equity securities of a corporation	1						

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Del	otor 1 Judith A. Sutton	se number (if known)	
	■ No. None of the above applies. Go to	Part 12.	
		I in the details below for each business.	
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
28.	institutions, creditors, or other parties. ■ No □ Yes. Fill in the details below.		nyone about your business? Include all financial
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Par	t 12: Sign Below		
are with 18 L	rue and correct. I understand that making a a bankruptcy case can result in fines up to .S.C. §§ 152, 1341, 1519, and 3571.	false statement, concealing property, or o	declare under penalty of perjury that the answers btaining money or property by fraud in connection ars, or both.
	Judith A. Sutton	Signature of Debtor 2	
	lith A. Sutton nature of Debtor 1	Signature of Deptor 2	
Dat	e _June 7, 2021	Date	
Did ■ N	· -	ent of Financial Affairs for Individuals Filin	g for Bankruptcy (Official Form 107)?
Did ■ N	you pay or agree to pay someone who is no	t an attorney to help you fill out bankruptc	y forms?
-	es. Name of Person Attach the <i>Bankru</i>	uptcy Petition Preparer's Notice, Declaration, a	and Signature (Official Form 119).

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Fill in this infor	mation to identify your	case:		
Debtor 1	Judith A. Sutton	Middle Name	Last Name	
Debtor 2	Filstivallie	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DIS	STRICT OF OHIO	
Case number				
(if known)				☐ Check if this is an amended filing
Official Fo				_
<u>Stateme</u> i	nt of Intentio	n for Indiv	viduals Filing Under Chapte	er 7 12/15
sign ar Be as complete write y	eople are filing togethend date the form.	le. If more space i nber (if known).	oth are equally responsible for supplying correct in is needed, attach a separate sheet to this form. On	
information be			D: Creditors Who Have Claims Secured by Property What do you intend to do with the property that	
identity the cr	editor and the property t	nat is conateral	secures a debt?	as exempt on Schedule C?
Creditor's S	SN Servicing Corpora	tion	Surrender the property.	□ No
name:			☐ Retain the property and redeem it.☐ Retain the property and enter into a	■ Yes
Description of	•		Reaffirmation Agreement.	
property securing debt	Youngstown, OH 4 Mahoning County	14511	☐ Retain the property and [explain]:	_
For any unexpire in the information You may assume	on below. Do not list rea e an unexpired persona	ase that you listed al estate leases. Ui al property lease if	I in Schedule G: Executory Contracts and Unexpire nexpired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p)(e lease period has not yet ended. 2).
Describe your u	unexpired personal pro	perty leases		Will the lease be assumed?
Lessor's name:	D&L Energy L	easing Compan	y Inc	□ No
				■ Yes
Description of lea	ased Oil, gas and m	ineral lease effe	ective 1/17/19	
Part 3: Sign B	Below			
Official Form 108		Statement of I	ntention for Individuals Filing Under Chapter 7	page 1

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Best Case Bankruptcy

Del	btor 1 Judith A. Sutton	Case number (if known)
	der penalty of perjury, I declare that I have indic perty that is subject to an unexpired lease.	cated my intention about any property of my estate that secures a debt and any personal
X	/s/ Judith A. Sutton	X Signature of Debtor 2
	Signature of Debtor 1	Signature of Bostor 2
	Date June 7. 2021	Date

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Fill in this information t	o identify your case:				only as di	rected in this form and	l in Form
Debtor 1 Judit	h A. Sutton		122	2A-1Supp:			
Debtor 2 (Spouse, if filing)				■ 1. There is	no presi	umption of abuse	
United States Bankrup	tcy Court for the: Northern District of	Ohio	'	applies	will be m	o determine if a presur nade under <i>Chapter 7</i> cial Form 122A-2).	•
Case number			,		`	,	_
(ii kilowii)						does not apply now be service but it could ap	
				☐ Check if t	this is aı	n amended filing	
Official Form	122A - 1						
Chapter 7 St	atement of Your Curr	ent Moi	nthly Inc	ome			04/20
attach a separate sheet t case number (if known). qualifying military servic	rate as possible. If two married people are on this form. Include the line number to what you believe that you are exempted from e, complete and file Statement of Exempting Your Current Monthly Income	ich the addition a presumption	nal information a of abuse becau	applies. On the use you do not	top of an	y additional pages, writ narily consumer debts o	e your name and r because of
1. What is your ma	rital and filing status? Check one only	<i>1</i> .					
■ Not married.	Fill out Column A, lines 2-11.						
☐ Married and y	our spouse is filing with you. Fill out	both Columns	A and B, lines	2-11.			
☐ Married and y	our spouse is NOT filing with you. Y	ou and your s	spouse are:				
☐ Living in th	e same household and are not legall	y separated.	Fill out both Co	lumns A and I	B, lines 2	P-11.	
penalty of p	arately or are legally separated. Fill ou perjury that you and your spouse are leg for reasons that do not include evading	gally separated	d under nonban	kruptcy law th	at applie	es or that you and your	
101(10A). For example the 6 months, add the	onthly income that you received from all so a, if you are filing on September 15, the 6-moi income for all 6 months and divide the total be a rental property, put the income from that pro	nth period would y 6. Fill in the re	l be March 1 throu sult. Do not includ	ugh August 31. de any income a	If the amo amount mo	unt of your monthly incon ore than once. For examp	ne varied during le, if both
				Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
Your gross wage payroll deduction.	es, salary, tips, bonuses, overtime, a	nd commissio	ons (before all	\$	0.00	\$	
, ,	intenance payments. Do not include p	ayments from	a spouse if	\$	0.00	\$	
of you or your d from an unmarrie and roommates.	n any source which are regularly paid ependents, including child support. I d partner, members of your household, include regular contributions from a spo clude payments you listed on line 3.	nclude regular your depende	contributions nts, parents,	\$	0.00	\$	
5. Net income from	operating a business, profession, o	r farm					
			otor 1				
1 ' '	efore all deductions)	\$ 0.00					
1	essary operating expenses	-\$ 0.00	0	Φ.	0.00	Φ.	
1	me from a business, profession, or farm	\$	Copy here ->	\$	0.00	\$	
6. Net income from	rental and other real property	Doh	otor 1				
Cross reseints /h	ofore all doductions	\$ 0.00					
. ,	efore all deductions) essary operating expenses	-\$ 0.00					
	me from rental or other real property	·	Copy here ->	\$	0.00	\$	

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 1

Best Case Bankruptcy

0.00

7. Interest, dividends, and royalties

8.	Unemployment compensation			Column A Debtor 1 \$	0.00	Column B Debtor 2 or non-filing s	
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here: For you \$						
	For your spouse \$		_				
	Pension or retirement income. Do not include any and benefit under the Social Security Act. Also, except as a not include any compensation, pension, pay, annuity, or United States Government in connection with a disability disability, or death of a member of the uniformed service pay paid under chapter 61 of title 10, then include that does not exceed the amount of retired pay to which you if retired under any provision of title 10 other than chapter 10 other 10 other than chapter 10 other 10 oth	tated in the next sentence allowance paid by the ty, combat-related injury cost. If you received any repay only to the extent that u would otherwise be entitle for that title.	e, do or etired at it itled	\$	0.00	\$	
10.	Income from all other sources not listed above. Sp Do not include any benefits received under the Social Sunder the Federal law relating to the national emergence under the National Emergencies Act (50 U.S.C. 1601 ecoronavirus disease 2019 (COVID-19); payments receiverime, a crime against humanity, or international or don compensation pension, pay, annuity, or allowance paid Government in connection with a disability, combat-relate death of a member of the uniformed services. If necess separate page and put the total below.	Security Act; payments m by declared by the Presid et seq.) with respect to the lived as a victim of a war mestic terrorism; or d by the United States ated injury or disability, or	lade lent	\$	0.00	\$	
				\$	0.00	\$	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	
11.	. Calculate your total current monthly income. Add line each column. Then add the total for Column A to the to		\$	0.00	+ _		= \$ 0.00 Total current monthly
Part	2: Determine Whether the Means Test Applies t	to You					income
12.	. Calculate your current monthly income for the year	. Follow these steps:					
	12a. Copy your total current monthly income from line	11		Сор	y line 11 l	here=>	\$0.00_
	Multiply by 12 (the number of months in a year)						x 12
	12b. The result is your annual income for this part of the	e form				12b.	\$
13.	. Calculate the median family income that applies to	you. Follow these steps:					
	Fill in the state in which you live.	ОН					
	Fill in the number of people in your household.	1					
		of household				13.	\$ 52,415.00
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link spec	cified	in the separ	ate instruc	ctions	
14.	To find a list of applicable median income amounts, go	online using the link spec	cified	in the separ	ate instruc	ctions	<u> </u>
14.	To find a list of applicable median income amounts, go for this form. This list may also be available at the bank. How do the lines compare? 14a. Line 12b is less than or equal to line 13. O Go to Part 3. Do NOT fill out or file Official 14b. Line 12b is more than line 13. On the top of	online using the link spec cruptcy clerk's office. On the top of page 1, chec Form 122A-2.	ck box	1, There is	no presun	nption of abuse	
	To find a list of applicable median income amounts, go for this form. This list may also be available at the bank. How do the lines compare? 14a. Line 12b is less than or equal to line 13. O Go to Part 3. Do NOT fill out or file Official 14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A–2.	online using the link spec cruptcy clerk's office. On the top of page 1, chec Form 122A-2.	ck box	1, There is	no presun	nption of abuse	
14.	To find a list of applicable median income amounts, go for this form. This list may also be available at the bank. How do the lines compare? 14a. Line 12b is less than or equal to line 13. O Go to Part 3. Do NOT fill out or file Official 14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A–2. Sign Below	online using the link spec cruptcy clerk's office. On the top of page 1, check Form 122A-2. of page 1, check box 2, T	ck box The pre	1, There is	no presun f abuse is	nption of abuse determined by	Form 122A-2.
	To find a list of applicable median income amounts, go for this form. This list may also be available at the bank. How do the lines compare? 14a. Line 12b is less than or equal to line 13. O Go to Part 3. Do NOT fill out or file Official 14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A–2.	online using the link spec cruptcy clerk's office. On the top of page 1, check Form 122A-2. of page 1, check box 2, T	ck box The pre	1, There is	no presun f abuse is	nption of abuse determined by	Form 122A-2.

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Best Case Bankruptcy

Debtor 1	Judith A. Sutton	Case number (if known)	
	Signature of Debtor 1		
Da	Ate June 7, 2021 MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form.		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	-
\$78	administrative fee	
+ \$15	trustee surcharge	
\$338	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

United States Bankruptcy Court Northern District of Ohio

In r	e Judith A. Sutton			Case N	o.	
			Debtor(s)	Chapte		
	DISCLOSU	RE OF COMPENS.	ATION OF ATTO	RNEY FOR	DEBTOR(S)	
1.	Pursuant to 11 U .S.C. § 329(a) a compensation paid to me within be rendered on behalf of the debt	one year before the filing of	the petition in bankruptcy	y, or agreed to be p	aid to me, for service	
	For legal services, I have ag	reed to accept		\$	1,200.00	
	Prior to the filing of this sta				1,000.00	
	Balance Due			\$	200.00	
2.	The source of the compensation	paid to me was:				
	■ Debtor □ Othe	r (specify):				
3.	The source of compensation to b	e paid to me is:				
	■ Debtor □ Othe	r (specify):				
4.	■ I have not agreed to share th	e above-disclosed compensa	ntion with any other person	n unless they are m	embers and associate	es of my law firm.
	☐ I have agreed to share the ab copy of the agreement, toget					ny law firm. A
5.	In return for the above-disclosed	fee, I have agreed to rende	r legal service for all aspec	cts of the bankrupto	ey case, including:	
	a. Representation of the debtor	in adversary proceedings an	d other contested bankrup	tcy matters;		
	reaffirmation agreer	ecured creditors to redu nents and applications dance of liens on house	as needed; preparatio	emption planni n and filing of m	ng; preparation a notions pursuant t	nd filing of to 11 USC
6.	By agreement with the debtor(s). Representation of the proceeding.	the above-disclosed fee done debtors in any discha			ions or any other	adversary
		C	ERTIFICATION			
this	I certify that the foregoing is a cobankruptcy proceeding.	omplete statement of any ag	reement or arrangement fo	or payment to me for	or representation of t	he debtor(s) in
	June 7, 2021		/s/ Roger S. Slai	n		
_	Date		Roger S. Slain #	0062049		
			Signature of Attorn Roger S. Slain, I			
			2012 West 25th	Street, Suite #70)1	
			Cleveland, OH 4	4113		
			(216) 241-2808 roger@rogersla	inlaw com		
			Name of law firm			